	PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004									Application or Docket Number			
	CLAIMS AS FILED - PART I							SMALL E	NTITY		ОТН	ER THAN	
t	J.S. NATION	AL STAGE FEE		(Column 1)		(Column 2)		RATE	<u> </u>		OR SMAI	L ENTITY	
H	ASIC FEE	IL OTAGE FEE							FE		RATE		
$\mathbf{l}$				SMALL ENT. = \$ 150  Satisfies PCT Article 33(1)-		All other situations =		BASIC FEE			R BASIC FEE	300	
F	XAMINATION	FEE	(4) = :	(4) = \$50/\$100		\$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	20	
S	EARCH FEE		ALL other	U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400		All other situations = \$ 250 / \$ 500		SEARCH FE	E		SEARCH FE		
FE	E FOR EXTR	A SPEC. PGS.	n	minus 100 =		/ 50 =		X \$ 125 =	=		X \$ 250	= /	
TC	TAL CHARGE	EABLE CLAIMS	19	minus 20 = ,	•			X \$ 25 =		01	R X \$ 50 =	:	
INI	DEPENDENT	CLAIMS	14	minus 3 = .	•	<u> </u>	ı	X \$ 100 =		OF	₹ X \$ 200 :	= 7C	
ML	ILTIPLE DEPE	NDENT CLAIM F	PRESENT					+ \$ 180 =		OF	+ \$ 360 =		
• If the difference in column 1 is less than zero, enter *0* in column 2							2 (	TOTAL	1	OF	TOTAL	<del></del>	
AMENDMENTA		(Column 1)  CLAIMS  REMAINING  AFTER  AMENDMENT		(Column HIGHES NUMBER PREVIOUS PAID FOR		PRESENT		SMALL RATE	ADDI- TIONAL FEE	OR		ADDI- TIONAL FEE	
	Total	•	Minus			=	.[	X \$ 25 =		OR	X \$ 50 =		
AME	Independent	•	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	<del> </del>	
	FIRST PRES	SENTATION OF I	MULTIPLE DEF	TIPLE DEPENDENT CLA			T	+ \$ 180 =		OR	+ \$ 360 =	1	
								OTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Column 2	2)	(Column 3)							
AMENUMENT B		CLAMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	=			X \$ 25 =		OR	X \$ 50 =	1	
	ndependent	•	Minus	***	=		3	<b>(\$100=</b>		OR	X \$ 200 =		
	FIRST PRESI	ENTATION OF M	ULTIPLE DEPE	TIPLE DEPENDENT CLAI			Ŀ	+ \$ 180 =		OR	+ \$ 360 =		
						···	TO	FEE		OR	TOTAL ADDIT. FEE		
						•							
** K	the "Highest Nun the "Highest Nun	nn 1 is less than the nber Previously Paid nber Previously Paid per Previously Paid I	For IN THIS SPA	ACE is less than ACE is less than	'20', en	er "3".	he ap	propriate box in	ı column 1.		·		

FORM PTO-875 (Rev. 02/2005)

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